Effective October 1, 2000													3/2	
CLAIMS AS FILED - PART (Column 1)						3			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			14		\$			RATE		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	355.00	OR	BASIC FEE	· 710.00	
TOTAL CHARGEABLE CLAIMS			/ minus 20=		·Ø			X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		· \$			X40=			OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESEN					/			+135=	_	·— – , · · · · ·	OR	+270=		
* If the difference in column 1 is less than zero, enter *0" in colu						olumn 2	ı	TOTA			OR	TOTAL	40	
CLAIMS AS AMENDED - PART II									- L		10	OTHER		
	1-65-86	(Column 1)		mn 2)	(Column 3)	SMAL	LE	NTITY	OR	SMALL				
dispusible 4-		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
reri.	Total	. 14	Minus		0	=		X\$ 9=	-		OR	X\$18=		
1	Independent	NTATION OF MU	Minus	ENDEN	T CLAIM			X40=			OR	X80=		
9	TINOT PRESE	NIATION OF MIC	JETIFEE DEF	CNOEN	COAIN		J	+135=	=		OR	+270=		
()								TOT ADDIT, F			OR	TOTAL ADDIT. FEE		
<u>Ö</u>		(Column 1)		(Colu		(Column 3)		,						
AMENDMENT/PC		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total		Minus	**		=]	X\$ 9=	-		OR	X\$18=		
AME	Independent	• NTATION OF MI	Minus	***	TCLANA	-	4 1	X40=			OR	X80=		
	FINOT PRESE		SETTPLE DEF	ENDEN	CLAIM		נ	+135=	=		OR	+270=		
								TOT ADDIT. F			OR	TOTAL ADDIT. FEE		
		(Column 1)			mn 2)	(Column 3)	L				_	· ·		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	•	Minus	••		=	╛╽	X\$ 9=			OR	X\$18=		
AME	independent	•	Minus	***		=		X40=				X80=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	T CLAIM				┪		OR			
• 1	f the entry in cobin	mn 1 is less than t	he entry in colu	mn 2. wrii	e "O" in co	tumn 3.		+135=			OR	+270=		
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

Application or Docket Number